

Application Data Sheet**Application Information**

|                                     |  |
|-------------------------------------|--|
| Application Type::                  | Regular  |
| Subject Matter::                    | Utility  |
| Suggested Classification::          |  |
| Suggested Group Art Unit::          |  |
| CD-ROM or CD-R?::                   | None   |
| Number of CD disks::                |  |
| Number of Copies of CDs::           |  |
| Sequence Submission?::              | None   |
| Computer Readable Form (CRF)::      | No   |
| Number of copies of CRF::           | 0  |
| Title::                             | PROCESS FOR REALISING A<br>BIOMORPHIC, STEREOLITHOGRAPHED<br>PHANTOM, WHICH IS<br>MULTICOMPARTMENTAL AND SUITABLE<br>FOR MULTIANALYTICAL<br>EXAMINATIONS, AND RELEVANT<br>DEVICE |
| Attorney Docket Number::            | 2520-1056  |
| Request for Early<br>Publication?:: | No   |
| Request for Non-Publication?::      | No   |
| Suggested Drawing Figure::          |  |
| Total Drawing Sheets::              | 8  |
| Small Entity?::                     | Yes  |
| Latin Name::                        |  |
| Variety Denomination Name::         |  |
| Petition Included?::                | No   |
| Petition Type::                     |  |
| Licensed US Gov't Agency::          |  |
| Contract or Grant Numbers::         |  |
| Secrecy Order in Parent             | No   |

Appl.?::

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ITALY  
Status:: Full Capacity  
Given Name:: BRUNO  
Middle Name::  
Family Name:: ALFANO  
Name Suffix::  
City of Residence:: NAPOLI  
State or Province of  
Residence::  
Country of Residence:: ITALY  
Street of Mailing               CONSIGLIO NAZIONALE DELLE RICERCHE-  
Address::                       ISTITUTO DI BIOSTRUTTURE E BIOIMMAGINI  
                                  VIA PANSINI, 5  
City of Mailing Address::       NAPOLI  
State or Province of Mailing Address::  
Country of Mailing Address::    ITALY  
Postal or Zip Code of Mailing Address:: 80131

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ITALY  
Status:: Full Capacity  
Given Name:: ANNA  
Middle Name::  
Family Name:: PRINSTER  
Name Suffix::  
City of Residence:: NAPOLI  
State or Province of  
Residence::  
Country of Residence:: ITALY

Street of Mailing                      CONSIGLIO NAZIONALE DELLE RICERCHE-  
Address::                                ISTITUTO DI BIOSTRUTTURE E BIOIMMAGINI  
    VIA PANSINI, 5

City of Mailing Address::              NAPOLI  
State or Province of Mailing Address::  
Country of Mailing Address::          ITALY  
Postal or Zip Code of Mailing Address:: 80131

Applicant Authority Type::            Inventor  
Primary Citizenship Country::          ITALY  
Status::                                Full Capacity  
Given Name::                            MARIO  
Middle Name::  
Family Name::                           QUANTARELLI  
Name Suffix::  
City of Residence::                    NAPOLI  
State or Province of  
Residence::  
Country of Residence::                ITALY

Street of Mailing                      CONSIGLIO NAZIONALE DELLE RICERCHE-  
Address::                                ISTITUTO DI BIOSTRUTTURE E BIOIMMAGINI  
    VIA PANSINI, 5

City of Mailing Address::              NAPOLI  
State or Province of Mailing Address::  
Country of Mailing Address::          ITALY  
Postal or Zip Code of Mailing Address:: 80131

**Correspondence Information**

Correspondence Customer              00466  
Number::

**Representative Information**

|                         |       |
|-------------------------|-------|
| Representative Customer | 00466 |
| Number::                |       |

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**Domestic Priority Information**

| Application::    | Continuity<br>Type:: | Parent<br>Application:: | Parent Filing<br>Date:: |
|------------------|----------------------|-------------------------|-------------------------|
| This application | National Stage of    | PCT/IT2003/000564       | 9/22/03                 |
|                  |                      |                         |                         |

**Foreign Priority Information**

| Country:: | Application<br>Number:: | Filing Date:: | Priority<br>Claimed:: |
|-----------|-------------------------|---------------|-----------------------|
| ITALY     | RM2002A000477           | 9/25/02       | Yes                   |
|           |                         |               |                       |

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::